



*"Delivering Excellence Every Day"*

**ASSIGNMENT OF COLLATERAL**

TO: Miami-Dade County, Florida  
c/o Miami Dade County Land Development Division  
Stephen P. Clark Center  
111 NW 1<sup>st</sup> Street, 14<sup>th</sup> Floor  
Miami, Florida 33128

[ ] SAVINGS PASSBOOK

\_\_\_\_\_  
NUMBER

[ ] CERTIFICATE OF DEPOSIT

\_\_\_\_\_  
NUMBER

FOR VALUE RECEIVED, the undersigned account holder(s) hereby assign(s) to Miami-Dade County, Florida, Savings Passbook/CD No. \_\_\_\_\_ issued by \_\_\_\_\_, in the amount of \$\_\_\_\_\_, dated \_\_\_\_\_, and the account represented thereby, up to an aggregate amount of \$\_\_\_\_\_.

This collateral has been tendered and is being held by this Bank/Association in safekeeping at your disposition for assignment as security for a Subdivision Bond as specified in a certain Agreement dated \_\_\_\_\_ between Miami-Dade County and \_\_\_\_\_ for  
(Principal's Name)

\_\_\_\_\_  
(Subdivision's Name)

It is understood that such dividends as may be paid on the above account by the Bank/Association during the period of the requested assignment will be credited directly to the account or mailed by check to the original account holder(s), as indicated by the Bank/Association's record. This assignment is acknowledged and approved by the undersigned account holder(s) and complete power and authority is given to the Bank/Association to withdraw from said Savings Passbook/CD and pay to Miami-Dade County any overdue balance on the Subdivision Bond secured by this assignment if requested by Miami-Dade County in a document signed by both the Director of the Public Works and Finance Departments or their designated assistants.

It is further understood that upon the maturity of this Savings Passbook/CD the Bank/Association will renew the Savings Passbook/CD without affecting the assignment.

Miami-Dade County will notify the Bank/Association in writing when the assignment is terminated and the funds may be returned to the account holder(s).

IN WITNESS WHEREOF,\_\_\_\_ have hereunto set \_\_\_\_ hand and \_\_\_\_ seal at \_\_\_\_\_,

(city & State)

this \_\_\_\_ day of \_\_\_\_\_, 2005.

**INDIVIDUAL**

WITNESS: \_\_\_\_\_

WITNESS: \_\_\_\_\_

**CORPORATION ONLY**

CORPORATE SEAL:

\_\_\_\_\_  
President/Vice President

\_\_\_\_\_  
Name of Corporation

STATE OF: \_\_\_\_\_)

COUNTY OF: \_\_\_\_\_)

I hereby certify, that on this \_\_\_\_ day of \_\_\_\_\_, 2005, before me appeared \_\_\_\_\_ who is/are personally known to me and has/have produced \_\_\_\_\_ as identification and who did/did not take an oath and has/have executed the foregoing Assignment to Miami-Dade County.

Witness my signature and official seal at \_\_\_\_\_, in the County and State aforesaid, the day and year last aforesaid.

NOTARY PUBLIC

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Name of Officer (type, print, stamp)

\_\_\_\_\_  
Serial Number

APPROVAL

The Bank/Association hereby approves the above requested assignment to you of Savings Passbook/CD No. \_\_\_\_\_ in the name of \_\_\_\_\_ upon terms and conditions outlined above.

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_

(Title)

Affix Bank/Association Corporate Seal

Address of Bank:

\_\_\_\_\_

\_\_\_\_\_

If the Bank/Association does not have a seal:

STATE OF: \_\_\_\_\_)

COUNTY OF: \_\_\_\_\_)

I hereby certify that on this \_\_\_\_ day of \_\_\_\_\_, 2005, before me appeared \_\_\_\_\_ who is/are personally known to me and has/have produced \_\_\_\_\_ as identification and who did/did not take an oath and has/have executed the foregoing Assignment to Miami-Dade County.

Witness my signature and official seal at \_\_\_\_\_, in the County and State aforesaid, the day and year last aforesaid.

NOTARY PUBLIC

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Name of Officer (type, print, and/or stamp)

\_\_\_\_\_  
Serial Number